

# District of Saanich Business Licence Application Commercial



**Business Account Number (Office use only):**

**Application Type (check one) Note: Application must be completed in full.**

- New Business to Saanich    
  Change of Address within Saanich    
  Change of Name    
  Re-Opening of Business

<b>Business Name:</b>		<b>Company Ownership Name (i.e. ABC Ltd.):</b>	
<b>Licencee Name and Address</b>			
First:		Last:	
Address:		City:	Postal Code:
Phone Number:		Email:	
<b>List Names of Additional Directors / Owners</b>			
<b>Name of On Site Contact</b>		Position:	
Phone Number:		Email:	
<b>Business Information</b>			
Number of Owners:		Number of Employees (not including owners):	CRA Business Number (If applicable):
Detailed Nature of Business (e.g., type of business, proposed uses, what services and/or products and goods are being offered):			
Business Location (Civic Address)		Mailing Address (if different from Business Location)	
Business Telephone Number:	Cell Phone Number:		Business Email or Other Email:
Business Website:	<div style="border: 1px solid red; padding: 2px;">           Will you be receiving clients at your Business Location?  <input type="checkbox"/> Yes     <input type="checkbox"/> No         </div>		Number of Parking Spaces provided for this Business:
Proposed new location opening date:		Previous Use of Space (Note: Change of use requires a building permit application):	
Zoning:	Development Permit Number (If applicable):	Is this space shared with another business? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Please fill in <u>one</u> of the boxes below that describes your Business Licence Type.</b> <b>NOTE: The Sq Ft is for space being used for business purposes.</b>			
Commercial <input type="checkbox"/> Sq. Ft:		Commercial & Intermunicipal <input type="checkbox"/> Sq. Ft (This will allow you to work within all 13 municipal boundaries):	

**WILL ANYONE BE RENOVATING OR ALTERING THE PREMISES?**    YES    NO

Description of proposed changes:

**Licencing for an Apartment or Hotel**

**Manager**

Name (s)		
Address	City	Postal Code
Email	Phone	Cell

**Specify number of rental units**

# of studio/bachelor \_\_\_\_\_ # 1 bdrm \_\_\_\_\_ # 2 bdrm \_\_\_\_\_ # 3 bdrm \_\_\_\_\_

**Applicant Checklist**

- Have you submitted Incorporation/Certification/Share Purchase Agreement? (if applicable)
- If your profession requires you to hold a trade certification, approval, or qualification by a federal, provincial or local authority having jurisdiction over the proposed business please provide a copy with your application e.g .Electrical Contractor, Physiotherapists, Massage Therapists, Driver instructor etc. (If applicable)
- Ensure that the proposed business/service meets any existing Development Permit requirements and is a permitted use as pertains to District of Saanich's Zoning Bylaw, No. 8200. The Zoning Bylaw can be found on the District of Saanich's website. Please contact the Saanich Planning Department at zoning@saanich.ca
- Commercial business involving clients: have you read the Saanich Fire Department's guidelines?  
<https://www.saanich.ca/EN/main/community/fire-prevention-safety/inspections/business-licence-inspections.html>

**IMPORTANT NOTICE**

- Businesses requiring signage must apply for a Sign Permit with the Planning Department. For information on the types of signs and regulations, applicants are encouraged to refer to Bylaw No. 8789 (Sign Bylaw) or contact the Saanich Planning Department at zoning@saanich.ca
- The Inter-Municipal Licence applies to a variety of mobile trades (e.g., RMT, Food Trucks, Construction Contractors etc.) and is honoured throughout Greater Victoria. Applicants must acquire an Inter-Municipal Licence from the municipality in which their business office is located, either a home or a commercial location.
- All business licences are issued in conformance with the District of Saanich BUSINESS LICENCE BYLAW, 2002, No. 8213 as amended.

By submitting this business licence application, the listed applicant hereby declares that all the information is correct and that they will comply with the bylaws and regulations of The District of Saanich.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Date**

This collection of personal information is authorized under the Local Government Act, Community Charter and section 26(c) of the Freedom of Information and Protection of Privacy Act. The information will be used for processing this application. Questions can be directed to the District's Privacy Officer at 770 Vernon Avenue, Victoria BC V8X 2W7 t. 250-475-1775, email foi@saanich.ca

**THIS SECTION IS FOR OFFICE USE ONLY**

Department	Approval	Date	Comments	Bylaw Rate(s)
Planning				Category:
Fire				Intermunicipal:
Inspections				Fee:
Health				Inspector:

Initiated by CFS?    Yes    No      If yes: CFS number: \_\_\_\_\_      Date Received: \_\_\_\_\_